ICF-MR Cost Analysis and Comparison with CAP/MRDD Services

Joint Legislative Oversight Committee on Mental Health, Developmental Disabilities, and Substance Abuse Services

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FACILITY VS COMMUNITY SETTINGS COMPARED

MR/DD

ICF MR vs. CAP MR



FACTORS CONSIDERED

- State Owned compared to Non-State Owned facilities
- Services included in facility/basic rates plus those acquired outside the facility/basic service
- Impact of ICF MR provider assessments on costs – State vs. Federal



Adults State Facilities & Community ICF-MR

Adults

ICF-MR Community Facilities	Number of Beck 1,2 (adult beck defined as 18 years and older)	` ~	Total Medicaid Funds for State- Operated ICFs- MR		Other health-care	plus other health		Total State Funds 6	Average Cost Per Unduplicated Medicaid Recipant
State Operated-									
J Iverson Riddle	325	293	44,418,275	466.32	462,561	51,791,433	50,874,725	916,708	176,763
Mrdoch Center	526	487	74,764,533	487.32	428,569	80,297,028	77,004,850	3,292,178	164,881
Caswell Center	430	417	77,127,639	566.32	782,006	81,552,804	77,434,387	4,118,417	195,570
OBerry Center	284	265	42,225,075	509.64	540,710	52,570,030	50,982,415	1,587,615	198,377
Comunity ICFs-MR									
32 bed or larger	253	324	27,310,317	254.08	1,838,387	29,148,703	21,821,448	7,327,255	89,965
<31 beds	1,983	2,010	184,595,600	267.65	12,927,873	197,523,473	147,871,010	49,652,463	98,270
Medically Fragile	141	Included in above		NA		Included in above	2		



Children State Facilities & Community ICF-MR

Children									
ICF-MR Community Facilities State Operated -	Number of Beds (children beds defined as less than 18 years)	Individuals Served (less than 21	Total Medicaid Funds for State- Operated ICFs- MR	Community ICF-MR Rate	Other health-care	plus other health	`	Total State Funds	Average Cost Per Unduplicated Medicaid Recipant
J Iverson Riddle - First In Families	0	7	787,177	466.32	5,140	1,790,841	1,759,143	31,698	255,834
Murdoch Center - BART & STARS	42	47	4,771,508	487.32	989,543	7,439,178	7,134,172	305,006	158,280
Community ICFs-MR	72	120	12 240 550	254.00	1 972 124	14 212 692	10.640.710	2.572.065	100 226
32 bed or larger < 31 beds				254.08 267.65				, ,	
Medically Fragile		Included in above	21,310,317	N/A	9,000,391	Included in above		9,149,273	110,172



CAP-MR/DD Children & Adults

	All CAP Comprehensive Waiver	All CAP Supports	Allowable One- time Costs (above the capitated	Other health-	suppporting room and board	State Service Funds suppporting former Thomas S class members		Average Cost per unduplicated CAP/MR/DD
CAP-MR/DD	Expenditures	Expenditures	amount)	costs	S 6	on CAP 6	Recipants	reciepient
Adults (18 years and								
older)	389,380,821	1,158,982	N/A	78065016	6081784	5782208	7142	67,274
Children (less than 18								
years)	96,715,751	1,300,440	N/A	57380397	571614	0	3629	42,978

Data Source: Division of Medical Assistance DRIVE or Rate setting, unless otherwise noted

1 State Operated ICF/MR bed number source: Division of State Operated Healthcare Facilities

2 Community ICF/MR bed number source: Division of Health Services Regulations

3 Column B and Column C use different age groups; for instance there are recipitants classified as "children" <21 years in Riddle and Caswell neither of which have children beds

4 Rates for Riddle, Murdoch and Caswell are the facility-specific rate effective 11/01/09; rates for the community facilities are an average of facility-specific rates

5 O'Berry rate is blended due to 3 rates for SFY 2010, current rate which was effective 11/01/09 is \$523.32

6 Datasource: Division of Mental Health, Developmental Disabilities and Substance Abuse Services



CAP MR - ICF/MR

		CAP MR		ICF MR - NSO	1	CF MR - SO **
Basic Services	\$	45,959	\$	90,149	\$	162,119
Medications		2,708		2,726		
Inpatient Hospital		764		2,237		478
Hospital Outpatient/ER		595		617		861
Physician		768		1,091		1,067
Case Management		3,422				
Nonphysician Practitioners		1,641				
Home Health/PCS		1,016				
DME		814				-
Annual Cost Per Recipient	\$	57,686	\$	96,821	\$	164,525
TOTAL RECIPIENTS	CT A	10,771	CT	2,692		1,517

** - STATE OWNED COST ESTIMATED

Comparison based on Total dollars expended



PROVIDER ASSESSMENTS

- Since 1991 CMS has allowed states to assessment/providers
- "Tests" must be met or fit within a "safe harbor" with a maximum assessment of 5 ½%
- Assessment on non-Medicare net patient revenue
- Assessments are allowed to be used to increase rates to providers amounts leveraged by Federal match
- The result is a mechanism the increase payments to approved providers without raising cost to the state
- Currently Nursing Homes and ICF-MR's only providers with an assessment approved.

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STATE DOLLAR COMPARISON

	CAP MR	ICF	MR - NSO	ICF MR - SO
Basic Services - Total	\$ 45,959	\$	90,149	\$ 162,119
State Dollars	\$ 16,086	\$	31,552	\$ 56,742
Less Assessment	 <u>-</u>		(4,008)	 (3,645)
Net Cost to NC	\$ 16,086	\$	27,544	\$ 53,097
Other Costs	 4,104		2,335	842
TOTAL NC COST	\$ 20,190	\$	29,879	\$ 53,939

State owned costs estimated

